Site ID RID095976544

Part A Application Yes X No ____

Site Name: Philip A. Hunt Chemical Corp Inspection Date: 1/13/82

Site Location: 1 Wellington Road Inspectors: EPA: Steve Fradkoff

Lincoln, RI 02865 State: ____

RCRA Contact: (401) 333-6114 Industry: S. Pozner Title: Env. Eng.

Phone No.: ____ Title: ____

Permits Issued: ____ Title: ____

In Compliance: Yes X No ____

TRIP SUMMARY

I. Facility Type and Process Description

Gen., Tr., TSD

Hunt manufactures chemicals for the photographic industry. Waste solvents (xylene) are mixed in fuel tanks and burned on site in the facility's boilers. Solid sludges are shipped off site in 55 gallon drums.

II. Summary of Violations or Deficiencies

None

Cont.

III. Recommendations

No action is necessary.

IV. State Response (as regards NOV's and Orders)

V. Hazardous Waste Profile

Type of Waste	Amt/mo	Method of Handling	Location
xylene	3,000 gal/mo	mixed with fuel oil	burned on site.
mixed ignitable solvents	30,000-40,000 gal/yr	"	"
lab solvent wastes	15 drums/yr	drum storage	off site disposal

VI. Information Requests

A. Inspector from Industry

Information Type	Date Requested by	Date Rec'd

B. Industry from Inspector

Information	Date Sent

C. EPA from State

Information	Date Sent

Site ID # RID095976544

Part A Application Yes ✓ No ___

RCRA INSPECTION CHECKLIST

Site Name: Philip Hunt Chemical

Site Location: 1 Willington Road
Lincoln RI 02865

Phone No: (401) 333-6114

Inspectors:

EPA: S. Fradkoff

State: ___

Industry: S. Poznen. Al Therrien Photographer

Inspection Date: 1/13/82

Type of Facility: Chem mfg

Generator: ✓

Transporter: —

TSD: ✓

Permits Issued: —

In Compliance Yes ✓ No ___

I. Generator with Temp. Storage or TSD Facility

A. Pre-Inspection Meeting

1. General Information (Process Description, etc.)

mfg photographic industry chemicals.
wastes solid sludge COD
Burn waste solvent in boilers

2. Hazardous Waste Profile

Type of Waste	Amt. of Waste kg/mo	Onsite Temp. Storage/ TSD	Transporter	Offsite TSD
Xylene	5,000 gal/month	Drum		Burned as fuel on site
mixed ingredients	30-40,000 gal/yr			"
lab wastes waste solvents	10 drums/yr non-cl			off site
	5 drums/yr cl			off site

3. Records

262.21 a.) Manifest — Manifests may be checked ahead of time by state personnel who have them on file - otherwise, random selection of some during inspection for review. Must be kept for 3 years.

1) Document No.: NI 12328

2) Generator ID, name, address: Hunt RID 095976544

3) Transporter(s) ID, name, address: G.M. Gandon Co.

4) TSD Facility ID, name, address: chem pack

5) Waste Type of Quantity: 9-55 gal drums waste methylene chloride.

6) Date of Acceptance: 9/30/81

262.50 i) International Shipping Manifest: no

262.42 ii) Exception Report: no

265.13 b.) Waste Analysis Plan

1. Plan on site: Yes
2. Plan should include (a) parameters: _____
   (b) test methods: _____
   ok (c) sampling method: _____
   (d) frequency: Yes
3. Copy of Results _____

265.15 c.) Inspection Schedule and log

1) Are inspections conducted Yes.
2) Written inspection schedule Yes
3) Inspection Log Yes

(A) Daily - loading and unloading of areas subject to spills: ✓
- discharge control equipment in tanks: _____
- incinerator system, thermal treatment equilpment, _____
- chem/phys/biol treatment equipment: _____
- freeboard level of surface impoundments: _____

(B) *Weekly - physical conditions of containers: ✓
- " tanks: _____
- " surface impoundments: ✓
- " chem/phys/bio. treatment facility: _____

265.16 *d.) Personnel Training Records

1.) Job titles/position descriptions and name of employee Yes

2.) Description of training: Yes

3.) Records of Training: Yes

4.) Training completed: Yes

* Required for Temporary Storage

*e.) Contingency Plan

265.53 1. Plan on site: Y-S

265.53 2. Plan to local authorities: Y-S

265.52 3. Content of Plan: Y-S

a) Emergency plan: Y-S

b) Local authority arrangements: Y-S

c) Identify emergency coordinator: Y-S

d) List of emergency equipment: Y-S

e) Evacuation plans: Y-S

f.) Closure and Post-closure Plans; Cost Estimates

265.112, .113, .114, .115 1. Closure Plan (TSD Facilities) -

a) Plan on site: Y-S

b) Does plan include:

1) Schedule of partial closure if applicable: Y-S

2) Estimate of maximum inventory of waste in storage or treatment at given time: Y-S

3) Schedule for final closure & an estimate of the expected year of closure: Y-S

4) Description of steps needed to decontaminate facility equipment: Y-S

5) Total time required for closure: Y-S

6) Certification of closure:

265.117, .118 2. Post-closure Plan (disposal facilities only)

a) Plan on site:

b) Does plan identify and include frequency of:

o planned ground water monitoring:
o planned maintenance & security activities:
o name, address and phone number of Post-closure contact:

c) Length of Post-closure period identified:

* Required for Temporary Storage

265.142 3. Closure Cost Estimate (TSD facilities) Yes

a) Estimate on site: Amount of estimate:

b) Estimate adjusted annually on 11/19 for inflation: Yes

c) Has Closure Plan changed? No

d) If answer to 3 is yes, has cost estimate changed?

265.144 4. Post-closure Cost Estimate (disposal facilities only)

a) Estimate on site: Amount of estimate:

b) Estimate adjusted annually on 11/19 for inflation:

c) Has Post-closure plan changed?

d) If answer to 3 is yes, has cost estimate changed?

265.73 g) Operating Records

1. Records on site Yes

2. Description, quantity, method and dates of disposal: Yes

3. Location onsite and manifest number: Yes

4. Results of waste analysis: —

5. Record of any incidents requiring use of contingency plan: Yes

6. Records and results of inspections: Yes

7. Closure and post-closure cost estimates if needed: Yes

B. Inspection

265.14 1. Site Security

a) 24 hour surveillance system: Yes

b) or Artificial or natural barrier: Yes

c) and Means to control entry: Yes

d) Danger sign posted at each entrance legible at 25': Yes

265.30-.37 **2. Site Preparedness/Prevention

a) Internal communication/alarm: Yes

b) Telephone/2-way radio: Yes

c) Portable fire control equipment: Yes

d) Adequate water for fire control: Yes

e) Testing and Maintenance of equipment: Yes

f) Adequate aisle spare: Yes

g) Access to equipment: Yes

265,170-.177 3. Containers

Leaks no

Ruptures no

Corrosion no

Closed Except in use Yes

Heat/Pressure —

50' bufferzone for I and R wastes:

I = Ignitable ✓ ; R = Reactive

No smoking signs near I or R waste ✓

Separation of incompatible wastes ✓

Evidence of spills no

262.30-.34 Pretransport requirements: packaging Yes

labelling

marking

placarding

Date of Waste Accumulation Yes

*NYR Check for impermeable base under containers, any drains, secondary containment

*NYR - Not yet regulated
**Required for Temporary Storage

265.190-.199 4. Tanks

Leaks _____

Ruptures _____

Corrosion: Check valves, piping controls for signs of corrosion _____

≥ 2' freeboard or containment _____

Heat/pressure _____

Evidence of spills _____

Inflow and outflow controls _____

Continuous Inflow _____ Means to stop flow? _____

Special Requirements for I and R wastes _____

265.220-.230 5. Surface Impoundments (Pits, Ponds and lagoons)

Protective Cover on Dikes _____

≥ 2' freeboard _____

Special requirements for I and R waste _____

Evidence of fire, explosion - leak _____

*NYR Liner _____

265.90-.94 **Groundwater Monitoring _____

265.250-.257 6. Waste Piles

Wind erosion control _____

**Prevention of leachate from pile (if hazardous) _____

Special requirements for I and R waste _____

Evidence of fire, explosion, leak _____

Separation of incompatible wastes _____

Waste analysis _____

*NYR - Not yet regulated

**November 19, 1981

265.340
265.382

7. Incinerators/Thermal Treatment

a) Steady State conditions_____

b) Inspect combustion and emission control instruments every 15 minutes_____

c) Observe stack plume hourly_____

d) Waste analysis:

1) Heating value of waste_____

2) Organic halogen content_____

3) Sulfur content_____

4) Lead concentrations_____

5) Mercury concentrations_____

e) Evidence of leaks of spills (pumps, valves, conveyors and pipes)_____

f) Daily Inspection of Emergency shutdown controls and Alarm systems_____

g) Special Requirements for incompatible wastes_____

265.272 - 265.282

8. Phys/Chem/Bio. Treatment

a) Leaks_____

b) Ruptures_____

c) Corrosion_____

d) Waste cut off_____

e) Waste analysis_____

f) Special Requirements for I and R waste_____

g) Special Requirements for incompatible wastes_____

265.272 - 265.282 9. Land Treatment

a) Approval document _____

*b) Run-on diversion _____

*c) Run-off collection; Treat if necessary _____

d) Waste Analysis _____

e) Presence of food chain crops, if so, refer to 265.276 ____

f) Unsaturated zone monitoring plan _____

g) Unsaturated zone waste analysis _____

h) Records of application dates, rates, quantities and location of waste _____

i) Special requirements for I and R wastes _____

j) Special requirements for incompatible wastes _____

265.90-.94 *k) Groundwater Monitoring _____

265.302-.315 10. Landfills

*a) Run-on diversion _____

*b) Run-off collection; Treat if necessary _____

c) Wind dispersion controlled _____

d) Records of all dimensions, locations, and contents _____

e) Special Requirements for I and R wastes _____

f) Special Requirements for Incompatible Wastes _____

*g) Special Requirements for liquids _____

*h) Reduction in volume of empty containers _____

265.90-.94 *i) Groundwater Monitoring _____

Subpart R 11. Underground Injection

Consult appropriate subparts.

*November 19, 1981

h.) Ground-Water Monitoring

265.91 1. (A) EPA specified ground-water monitoring program implemented ? Yes
If no go to 2
- 1 upgradient and 3 downgradient wells _____
- All wells cased and screened at appropriate depth _____
- Annular space sealed _____

265.92 (B) Sampling and analysis plan at facility _____

(C) Parameters sampled
- Primary drinking water standards (265.92b1) _____
- Ground-water quality (265.92b2) _____
- Ground-water contamination indicators (265.92b3) _____

(D) Monitoring frequency
- (11/19/81 - 11/18/82)
  - o All parameters all wells-quarterly _____
  - o 4 replicates each ground-water contamination indicators sample upgradient wells _____
  - o End of 1st year calculate initial background mean and variance for contamination indicators _____
- (11/19/82 - Permit Issuance)
  - o Ground-water quality - annually _____
  - o Ground-water contamination indicators -semi-annually 4 replicates each well each sample _____
- Ground-water elevations with each sample _____

265.93 (E) Preparation, evaluation and response
- Ground-water quality assessment program outline kept at facility _____
- Ground-water contamination indicator results for each well compared via Student's T test to initial background arithmetic mean _____

265.94 (F) Records of required analyses per 265.94(A1) kept on site (thru post-closure) _____
Necessary reports submitted to R.A. or State Director (see 265.94A2) _____

265.90C 2.(A) Written hazardous waste migration potential demonstration prepared and kept on-site? _____
If no go to 3
- Waiver demonstration certified by qualified geologist or geotechnical engineer _____
- Demonstration establishes
  - o Potential for migration of hazardous waste via uppermost aquifer _____
  - o Potential for hazardous waste to migrate to a water supply or surface water _____
- Obtain copy for review by EPA _____
  If copy not obtained why? _____

265.90D 3(A) Alternative ground-water monitoring program has been implemented

- Specific plan was submitted to R. A. (or State Director) by 11/19/81 _____
- Plan approved _____ (Date)

- By 11/19/81 ground-water quality assessment per 265.93(d)(4) implemented quarterly determinations made until closure _____

- Recordkeeping and reporting requirements in 265.94(6) complied with _____

C. Requests for Information

D. Photos Taken

E. Sampling Inspection Needed

F. Potential for Imminent Hazard, Air, or Water Discharge Violations

G. Proximity to Residential Area, Surface Water, Recharge Zone, etc.